

PTO/SB/01 (08-03)
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U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

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DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)

Declaration Submitted With Initial Filing OR Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)

Attorney Docket Number	UNI 1773-009
First Named Inventor	Hubert Naimer, et al.
COMPLETE IF KNOWN	
Application Number	10/662,236
Filing Date	09/15/2003
Art Unit	2632
Examiner Name	

I hereby declare that:

Each inventor's residence, mailing address, and citizenship are as stated below next to their name.

I believe the inventor(s) named below to be the original and first inventor(s) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

ANP/RNP Display

(Title of the Invention)

the specification of which

is attached hereto

OR

was filed on (MM/DD/YYYY) 09/15/2003 as United States Application Number or PCT International

Application Number 10/662,236 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT international filing date of the continuation-in-part application.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights certificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached? Yes	Certified Copy Attached? No
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

[Page 1 of 2]

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DECLARATION — Utility or Design Patent ApplicationDirect all correspondence to: Customer Number: **08698** OR Correspondence address below

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Address

City

State

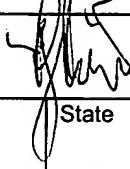
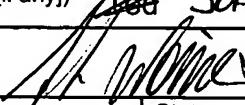
ZIP

Country

Telephone

Fax

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

NAME OF SOLE OR FIRST INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <i>Hubert LAURENT</i>		Family Name or Surname <i>Naimer</i>	
Inventor's Signature 		Date	
Residence: City <i>ASCONA</i>	State <i>TI</i>	Country <i>SWITZERLAND</i>	Citizenship <i>swiss</i>
Mailing Address <i>NUVOLA BIGNA</i>			
City <i>ASCONA</i>	State <i>TI</i>	ZIP <i>CH 6612</i>	Country <i>SWITZERLAND</i>
NAME OF SECOND INVENTOR:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle [if any]) <i>JOACHIM LAURENT</i>		Family Name or Surname <i>Naimer</i>	
Inventor's Signature 		Date	
Residence: City <i>ASCONA</i>	State <i>TI</i>	Country <i>SWITZERLAND</i>	Citizenship <i>swiss</i>
Mailing Address <i>VIA MOSCIA 118</i>			
City <i>ASCONA</i>	State <i>TI</i>	ZIP <i>CH 6612</i>	Country <i>SWITZERLAND</i>

Additional inventors or a legal representative are being named on the 2 supplemental sheet(s) PTO/SB/02A or 02LR attached hereto.

MAY 03 2004

PTO/SB/02A (08-03)

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DECLARATION

ADDITIONAL INVENTOR(S)
Supplemental Sheet

Page 1 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Jim		Brannen	
Inventor's Signature	<i>Jim Brannen</i>		
Residence: City	Lawrenceville	State	GA
Country	USA	Citizenship	USA
Mailing Address	1854 JENNA LYN CT.		
Mailing Address			
City	Lawrenceville	State	GA
Zip	30043	Country	USA
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))		Family Name or Surname	
Tom		Lawrence	
Inventor's Signature	<i>Tom Lawrence</i>		
Residence: City	Knoxville	State	TN
Country	United States	Citizenship	US
Mailing Address	405 OCALA DRIVE		
Mailing Address			
City	Knoxville	State	TN
Zip	37918	Country	United States
Name of Additional Joint Inventor, if any:	<input type="checkbox"/> A petition has been filed for this unsigned inventor		
Given Name (first and middle (if any))		Family Name or Surname	
Grady		Dees	
Inventor's Signature	<i>Grady Dees</i>		
Residence: City		State	
Country		Citizenship	
Mailing Address			
Mailing Address			
City		State	
Zip		Country	

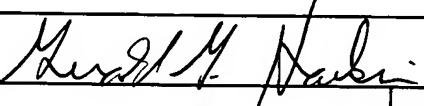
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DECLARATION**ADDITIONAL INVENTOR(S)
Supplemental Sheet**

Page 2 of 2

Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Jerry		Harkin	
Inventor's Signature			
Residence: City		State	Country
Mailing Address			
Mailing Address			
City		State	Zip
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
Given Name (first and middle (if any))		Family Name or Surname	
Inventor's Signature		Date	
Residence: City		State	Country
Mailing Address			
Mailing Address			
City		State	Zip
Name of Additional Joint Inventor, if any:		<input type="checkbox"/> A petition has been filed for this unsigned inventor	
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Inventor's Signature		Date	
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Mailing Address			
Mailing Address			
City		State	Zip

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**POWER OF ATTORNEY
and
CORRESPONDENCE ADDRESS
INDICATION FORM**

Application Number	10/662,236
Filing Date	09/15/2003
First Named Inventor	Hubert Naimer, et al.
Title	ANP/RNP Display
Art Unit	2632
Examiner Name	
Attorney Docket Number	UNI 1773-009

I hereby appoint:

 Practitioners associated with the Customer Number:

08698

OR

 Practitioner(s) named below:

Name	Registration Number

as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact all business in the United States Patent and Trademark Office connected therewith.

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<input type="checkbox"/>	Firm or Individual Name	
Address		
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City	State	Zip
Country		
Telephone	Fax	

I am the:

 Applicant/Inventor. Assignee of record of the entire interest. See 37 CFR 3.71.
*Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)***SIGNATURE of Applicant or Assignee of Record**

Name	Ted Naimer
Signature	
Date	Telephone

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

 *Total of 6 forms are submitted.

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PTO/SB/81 (09-03)

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SIGNATURE of Applicant or Assignee of Record

Name	Jim Brannen		
Signature	<i>Jim Brannen</i>		
Date	25 MARCH 2004	Telephone	770 242 7466

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below*.

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SIGNATURE of Applicant or Assignee of Record

Name	Grady Dees	
Signature		
Date		Telephone

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Telephone			Fax	

I am the:

Applicant/Inventor.

Assignee of record of the entire interest. See 37 CFR 3.71.
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SIGNATURE of Applicant or Assignee of Record

Name	Jerry Harkin		
Signature			
Date			
	Telephone		

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SIGNATURE of Applicant or Assignee of Record

Name	Tom Lawrence		
Signature	<i>T. Lawrence</i>		
Date	25 March 2004	Telephone	(865) 687-6113

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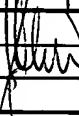
OR

<input type="checkbox"/>	Firm or Individual Name	
Address		
Address		
City	State	Zip
Country		
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SIGNATURE of Applicant or Assignee of Record

Name	Hubert Naimer	
Signature		
Date		Telephone

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